Full Name of Party Filing Document	_
Mailing Address (Street or Post Office Box)	_
City, State and Zip Code	_
Telephone	<u> </u>
	OR THE FOURTH JUDICIAL DISTRICT FOR THE COUNTY OF
	Case No.
Petitioner, vs.	AFFIDAVIT OF MAILING PURSUANT TO ORDER FOR PUBLICATION OF SUMMONS
Respondent.	
Joint Temporary Restraining Order (Proper other	and Order to Attend parent education program ty) Joint Temporary Restraining Order (Children) to, the
Respondent, at his/her last known address:	:
	Petitioner
STATE OF IDAHO)	
County of) ss.	
Public in and for the State, personally apper identified to me to be the person whose narracknowledged to me that s/he executed the	, 20, before me, the undersigned, a Notary eared, known or me is subscribed to the foregoing instrument and e same. Into set my hand and seal on the date last above
	Notary Public for Idaho Residing at Commission expires